SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:						PAGE	3	32	OF		158
(ch	(check only one)										
>	<	11a		11b		11c		12			
		13		14		15		16			17

Any information copied from such Reports and St or for commercial purposes, other than using the								
NAME OF COMMITTEE (In Full)	, _p							
, ,	Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC							
Full Name (Last, First, Middle Initial) Jennifer Phipps								
Mailing Address 7000 Cardinal Place 3B0442	-							
City	State Zip Code	11 30 2015 Transaction ID : PR124988819741						
Canal Winchester	OH 43110	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	20.00						
Name of Employer	Occupation							
CARDINAL HEALTH, INC	Dir, Accounting							
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekly)						
Full Name (Last, First, Middle Initial) 3. Eileen Lehmann	en Lehmann							
Mailing Address 8585 Pennington Ct		M = M / D = D / Y = Y = Y						
City	State Zip Code	11 30 2015						
Powell	OH 43065	Transaction ID : PR124989019741 Amount of Each Receipt this Period						
	10000	Amount of Lacti necelpt this Period						
FEC ID number of contributing federal political committee.	C	76.00						
Name of Employer	Occupation							
CARDINAL HEALTH, INC	Dir, Internal Communications							
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 570.00	P/R Deduction (\$38.00 Bi-Weekly)						
Full Name (Last, First, Middle Initial) C. Herman L Wright								
Mailing Address 321 Ashmoore Circle West								
City	State Zip Code	11 30 2015 Transaction ID : PR124989119741						
Powell	OH 43065	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	20.00						
Name of Employer	Occupation							
CARDINAL HEALTH, INC	Asst Gen Csl, Comm/Trans							
Receipt For:	Aggregate Year-to-Date ▼							
Primary General Other (specify) ▼	240.00	P/R Deduction (\$10.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)	116.00							
TOTAL This Period (last page this line number of	<u> </u>							